	PART B - FEE(S) TRANSMITTAL								
7(Complete and send	this form, togethe	ee(s), to: <u>Mail</u> Mai Con P.O Ale:), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885			·		
10	NSTRUCTIONS: TISSEME should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed who portopriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address portopriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" dicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS"								
E	aintenance fee notification CURRENT CORRESPONDEN	ODS. NCE ADDRESS (Note: Use Bloc	k) for any change of address)	Fee(s) Transmittal. This rs. Each additional its own certificate (certificate cannot to paper, such as an a of mailing or transm	se used for a ssignment o nission.	omestic mailings of the any other accompanying or formal drawing, must	
	2027	7590 02/21/2		"Evore	4 4 100 111	of Mailing or Tra	4E 11C		
	3100 TOWER BI SUITE 1200		& HUNT, P. A.	I hereby centify that correspondence is being deposited with the Service "Express Mail Post Office to Addressee" service under indicated below and is addressed to the Commissioner for Pate Alexandria, VA 22313-1450.				P.O. Box 1450,	
	DURHAM, NC 27707			L	ura J. Plea	asants	+	(Depositor's name)	
05/	23/2007 WABDELR3 00000069 09752198				2 Long	HUDDOM	6	(Signature)	
	FC:1501 FC:1504	1400.00 300.00		Ma	y 21, 2007			(Dutc)	
٢	APPLICATION NO.	FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET N		ET NO.	CONFIRMATION NO.				
ſ	00/752 108 12/29/2000 LEG A. nayot III						8128		
1	TITLE OF INVENTION: METHOD AND APPARATUS FOR VERIFYING A MATCH BETWEEN CONTENTS OF AN ENCLOSURE AND DATA PRINTED ON THE ENCLOSURE								
{	APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	E FEE TOTAL FE	.E(S) DUE	DATE DUE	
ļ	nonprovisional	NO	\$1400	\$300	\$0	\$ 1 ⁻	700	05/21/2007	
	EXAMINER		ART UNIT	ART UNIT CLASS-SUBCLASS					
	AGWUMEZIE, CHARLES C		3621	3621 705-001000					
	1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the (1) the names of up to agents OR, alternat	o 3 registered pater ively,	nt attorneys Ue		Wilson, Taylen	
				(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
	3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)							nument has been filed for	
	3. ASSIGNEE NAME AND RESIDENCE DATA TO BE HINTED ON the patent. If an assignee is identified below, the document has been filed PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.								
	(A) NAME OF ASS		(B) RESIDENCE: (CIT	"Y and STATE OR (COUNTRY)				
	Bowe Bell + Howell Company			Durham,					
	Please check the approp	priate assignee category	or categories (will not be p	printed on the patent):	Individual C	Corporation or other	private gro	up entity Government	
	4a. The following fee(s	s) are submitted:	4b. Payment of Fee(s): (Pl		any previously paid	t issue fee s	hown above)		
				Payment by credit of		8 is attached.			
	Advance Order - # of Copies			The Director is here	The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).				
	5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.						<u> </u>		
	a. Applicant cla	b. Applicant is no l	onger claiming SMA in the applicant; a re-	gistered attorney or	agent; or th	e assignee or other party in			
	interest as shown by th	ne records of the United S	States Patent and Tradema	irk Office.					
	Authorized Signatu	are <u>B</u> 1-1	T.	•	· · · · · · · · · · · · · · · · · · ·	y 21, 2007			
	Typed or printed na	ame Jeffrey L.				No. 36,058			
	771 :	mention is required by 3	CER 1311 The informa	ation is required to obtain	or retain a benefit by	the public which i	s to file (an	by the USPTO to process	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450. Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.